

FINANCIAL AFFIDAVIT

Rev. 5/98 IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEES
IN UNITED STATES MAGISTRATE DISTRICT APPEALS COURT or OTHER PANEL (Specify below)

IN THE CASE OF

v.s. Cordano

FOR

AT

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

Antonio Cordano

CHARGE/OFFENSE (describe if applicable & check box →)

 Felony Misdemeanor

- Defendant—Adult
- Defendant - Juvenile
- Appellant
- Probation Violator
- Parole Violator
- Habeas Petitioner
- 2255 Petitioner
- Material Witness
- Other

DOCKET NUMBERS

Magistrate

District Court

Court of Appeals

CR 04-10114-001 D.P.W.

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

EMPLOY- MENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed			
	Name and address of employer: _____			
	IF YES , how much do you earn per month? \$ _____	IF NO , give month and year of last employment How much did you earn per month? \$ _____		
ASSETS	If married is your Spouse employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	IF YES , how much does your Spouse earn per month? \$ _____	If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____		
	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
OTHER INCOME	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES	RECEIVED \$ <u>250</u> SOURCES _____		
	CASH	Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ _____		
	PROP- ERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
OBLIGATIONS & DEBTS	IF YES, GIVE THE VALUE AND \$ DESCRIBE IT	VALUE _____ DESCRIPTION _____		
	DEPENDENTS	MARITAL STATUS <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR <input type="checkbox"/> DIVORCED	Total No. of Dependents _____	List persons you actually support and your relationship to them
		DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	APARTMENT OR HOME <u>Bowery Court</u>	Creditors _____
				\$ _____

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

4-15-04

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)Antonio Cordano